

Revision: HCFA-PM-97-2
December 1997

ATTACHMENT 2.6-A
Page 4c
OMB No. 0938-0673

State: New York

Citation	Condition or Requirement
----------	--------------------------

In determining any excess shelter allowance, utility expenses are calculated using:

- _____ the standard utility allowance under §5(e) of the Food Stamp Act of 1977; or
- _____ the actual unreimbursable amount of the community spouse's utility expenses less any portion of such amount included in condominium or cooperative charges.

b. The monthly income allowance for other dependent family members living with the community spouse is:

_____ $\frac{x}{100}$ one-third of the amount by which the poverty level component (calculated under §1924(d)(3)(A)(i) of the Act, using the applicable percentage specified in §1924 (d)(3)(B)) exceeds the dependent family member's monthly income.

_____ a greater amount calculated as follows:

The following definition is used in lieu of the definition provided by the Secretary to determine the dependency of family members under §1924 (d)(1):

c. Amounts for health care expenses described below that are incurred by and for the institutionalized individual and are not subject to payments by a third party:

(i) Medicaid, Medicare, and other health insurance premiums, deductibles, or coinsurance charges, or copayments.

(ii) Necessary medical or remedial care recognized under State law but not covered under the State plan. (Reasonable limits on amounts are described in Supplement 3 to ATTACHMENT 2.6-A.)

98-05
TN No. _____
Supersedes _____
TN No. NEW

Approval Date MAY 15 1998

Effective Date JAN 1 1998

OFFICIAL

State: New York

Citation	Condition or Requirement
435.725 435.733 435.832	<p>4. In addition to any amounts deductible under the items above, the following monthly amounts are deducted from the remaining monthly income of an institutionalized individual or an institutionalized couple:</p> <p>a. An amount for the maintenance needs of each member of a family living in the institutionalized individual's home with no community spouse living in the home. The amount must be based on a reasonable assessment of need but must not exceed the higher of the:</p> <ul style="list-style-type: none">o AFDC level; oro Medically needy level: <p>(Check one)</p> <ul style="list-style-type: none">-- AFDC levels in Supplement 1<input checked="" type="checkbox"/> Medically needy level in Supplement 1* Other: \$ _____ <p>b. Amounts for health care expenses described below that have not been deducted under 3.c. above (i.e., for an institutionalized individual with a community spouse), are incurred by and for the institutionalized individual or institutionalized couple, and are not subject to the payment by a third party:</p> <p>(i) Medicaid, Medicare, and other health insurance premiums, deductibles, or coinsurance charges, or copayments.</p> <p>(ii) Necessary medical or remedial care recognized under State law but not covered under the State plan. (Reasonable limits on amount are described in Supplement 3 to ATTACHMENT 2.6-A.)</p>
435.725 435.733 435.832	<p>5. At the option of the State, as specified below, the following is deducted from any remaining monthly income of an institutionalized individual or an institutionalized couple:</p>

A monthly amount for the maintenance of the home of the individual or couple for not longer than 6 months if a physician has certified that the individual, or one member of the institutionalized couple, is likely to return to the home within that period:

____ No.

☒ Yes (the applicable amount is shown on page 5a.)

* The State uses the higher of the standard for Low Income Families (AFDC), or medically needy income level.

TN No. 08-05
Supersedes 93-3
TN No. _____

MAY 15 1998

Approval Date _____

Effective Date _____

JAN 1 1998

OFFICIAL

Revision: HCFA-PM-97-2
December 1997

ATTACHMENT 2.6-A
Page 5a
OMB No.:0938-0673

State: New York

Citation	Condition or Requirement
<u>X</u>	Amount for maintenance of home is: \$ <u>medically needy</u> level for one in Supplement 1
<u> </u>	Amount for maintenance of home is the actual maintenance costs not to exceed \$ <u> </u> .
<u> </u>	Amount for maintenance of home is deductible when countable income is determined under §1924(d)(1) of the Act only if the individuals' home and the community spouse's home are different.
<u> </u>	Amount for maintenance of home is not deductible when countable income is determined under §1924 (d)(1) of the Act.

OFFICIAL

98-05
TN No. New
Supersedes
TN No.

MAY 15 1998

Approval Date

Effective Date JAN 1 1998

OFFICIAL

Revision: HCFA-PM-92-1 (MB)
FEBRUARY 1992

ATTACHMENT 2.6-A
Page 6

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: New York

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)	Condition or Requirement
42 CFR 435.711 435.721, 435.831	<p>C. <u>Financial Eligibility</u></p> <p>For individuals who are AFDC or SSI recipients, the income and resource levels and methods for determining countable income and resources of the AFDC and SSI program apply, unless the plan provides for more restrictive levels and methods than SSI for SSI recipients under section 1902(f) of the Act, or more liberal methods under section 1902(r)(2) of the Act, as specified below.</p> <p>For individuals who are not AFDC or SSI recipients in a non-section 1902(f) State and those who are deemed to be cash assistance recipients, the financial eligibility requirements specified in this section C apply.</p> <p>--</p> <p><u>Supplement 1 to ATTACHMENT 2.6-A specifies the income levels for mandatory and optional categorically needy groups of individuals, including individuals with incomes related to the Federal income poverty level--pregnant women and infants or children covered under sections 1902(a)(10)(A)(i)(IV), 1902(a)(10)(A)(i)(VI), 1902(a)(10)(A)(i)(VII), and 1902(a)(10)(A)(ii)(IX) of the Act and aged and disabled individuals covered under section 1902(a)(10)(A)(ii)(X) of the Act--and for mandatory groups of qualified Medicare beneficiaries covered under section 1902(a)(10)(E)(i) of the Act.</u></p>

TN No. 92-27
Supersedes
TN No. 91-78

Approval Date JAN 20 1993

Effective Date APR 1 - 1992

OFFICIAL

State: New York

Citation	Condition or Requirement
<input checked="" type="checkbox"/>	<u>Supplement 2 to ATTACHMENT 2.6-A</u> specifies the resource levels for mandatory and optional categorically needy poverty level related groups, and for medically needy groups.
<input type="checkbox"/>	<u>Supplement 7 to ATTACHMENT 2.6-A</u> specifies the income levels for categorically needy aged, blind and disabled persons who are covered under requirements more restrictive than SSI.
<input type="checkbox"/>	<u>Supplement 4 to ATTACHMENT 2.6-A</u> specifies the methods for determining income eligibility used by States that have more restrictive methods than SSI, permitted under section 1902(f) of the Act.
<input type="checkbox"/>	<u>Supplement 5 to ATTACHMENT 2.6-A</u> specifies the methods for determining resource eligibility used by States that have more restrictive methods than SSI, permitted under section 1902(f) of the Act.
<input checked="" type="checkbox"/>	<u>Supplement 8a to ATTACHMENT 2.6-A</u> specifies the methods for determining income eligibility used by States that are more liberal than the methods of the cash assistance programs, permitted under section 1902(r)(2) of the Act.
<input checked="" type="checkbox"/>	<u>Supplement 8b to ATTACHMENT 2.6-A</u> specifies the methods for determining resource eligibility used by States that are more liberal than the methods of the cash assistance programs, permitted under section 1902(r)(2) of the Act.

91-78
TN No.
Superseded **New**
TN No.

Approval Date MAR 1 1992

Effective Date OCT 1 1991

HCFA ID: 7985E

OFFICIAL

Revision: HCFA-PM-92-1 (MB)
FEBRUARY 1992

ATTACHMENT 2.6-A
Page 7

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: New York

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)	Condition or Requirement
1902(r)(2) of the Act	<p>1. <u>Methods of Determining Income</u></p> <p>a. <u>AFDC-related individuals (except for poverty level related pregnant women, infants, and children).</u></p> <p>(1) In determining countable income for AFDC-related individuals, the following methods are used:</p> <p>— (a) The methods under the State's approved AFDC plan only; or</p> <p><u>X</u> (b) The methods under the State's approved AFDC plan and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.</p> <p>(2) In determining relative financial responsibility, the agency considers only the income of spouses living in the same household as available to spouses and the income of parents as available to children living with parents until the children become 21.</p>
1902(e)(6) the Act	<p>(3) Agency continues to treat women eligible under the provisions of sections 1902(a)(10) of the Act as eligible, without regard to any changes in income of the family of which she is a member, for the 60-day period after her pregnancy ends and any remaining days in the month in which the 60th day falls.</p>

92 - 27

TN No. _____
Supersedes _____
TN No. 91-78

Approval Date JAN 20 1993

Effective Date APR 1 - 1992

OFFICIAL

Citation

Condition or Requirement

87 35

435.721
435.831
and 1902(m)(1)(B)
and (m)(4) of
the Act,
P.L. 99-509
(Secs. 9402(a)
and (b))

a. Except as specified under item C.1.e. below, in determining countable income for AFDC related individuals, the disregards and exemptions in the State's approved AFDC plan are applied.

b. In determining countable income for aged individuals, including aged individuals with incomes up to the Federal nonfarm poverty line described in section 1902(m)(1) of the Act, the following disregards are applied:

X The disregards of the SSI program. *

— The disregards of the State supplementary payment program, as follows:

— The disregards of the SSI program, except for the following restrictions, applied under the provisions of section 1902(f) of the Act:

*This is out
of sync.
This is 100% FPL
not elect this*

* Except for the less restrictive disregards as specified in Supplement ¹¹ to Attachment 2.6A of the State Plan Amendment 85-25.

TN No. 87-35
Supersedes
TN No. 85-25

Approval Date DEC 5 1991

Effective Date JUL - 1 1987

HCFA ID: 1038P/0015P

OFFICIAL

Revision: HCFA-PM-92 -1 (MB)
FEBRUARY 1992

ATTACHMENT 2.6-A
Page 7a

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: New York

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)	Condition or Requirement
42 CFR 435.721 435.831, and 1902(m)(1)(B)(m)(4) and 1902(r)(2) of the Act	b. <u>Aged individuals.</u> In determining countable income for aged individuals, including aged individuals with incomes up to the Federal poverty level described in section 1902(m)(1) of the Act, the following methods are used: <input checked="" type="checkbox"/> The methods of the SSI program only. <input type="checkbox"/> The methods of the SSI program and/or any more liberal methods described in <u>Supplement 8a to ATTACHMENT 2.6-A.</u>

OK

TN No. 92-27
Supersedes New
TN No. New
Approval Date JAN 20 1993 Effective Date APR 1 - 1992

OFFICIAL

Citation	Condition or Requirement	87 35
----------	--------------------------	-------

- c. In determining countable income for blind individuals, the following disregards are applied:

☒ The disregards of the SSI program. *

☐ The disregards of the State supplementary payment program, as follows:

☐ The disregards of the SSI program, except for the following restrictions applied under the provisions of section 1902(f) of the Act.

435.721
435.831
and 1902(m)(1)(B)
and (m)(4) of
the Act,
P.L. 99-509
(Secs. 9402(a)
and (b))

- d. In determining countable income for disabled individuals, including disabled individuals with incomes up to the Federal nonfarm poverty line described in section 1902(m)(1) of the Act the following disregards are applied:

☒ The disregards of the SSI program. *

*Except for less restrictive disregards as specified in Supplement ^{//} to Attachment 2.6A of the State Plan Amendment 85-25.

TN No. 87-33
Supersedes
TN No. 85-25

Approval Date DEC 5 1991

Effective Date JUL - 1 1987

HCFA ID: 1038P/0015P

State: New York

OFFICIAL

Citation	Condition or Requirement
<input type="checkbox"/>	For individuals other than optional State supplement recipients, more restrictive methods than SSI, applied under the provisions of section 1902(f) of the Act, as specified in <u>Supplement 4 to ATTACHMENT 2.6-A</u> ; and any more liberal methods described in <u>Supplement 8a to ATTACHMENT 2.6-A</u> .
<input type="checkbox"/>	For institutional couples, the methods specified under section 1611(e)(5) of the Act.
<input type="checkbox"/>	For optional State supplement recipients under \$435.230, income methods more liberal than SSI, as specified in <u>Supplement 4 to ATTACHMENT 2.6-A</u> .
<input type="checkbox"/>	For optional State supplement recipients in section 1902(f) States and SSI criteria States without section 1616 or 1634 agreements-- — SSI methods only. — SSI methods and/or any more liberal methods than SSI described in <u>Supplement 8a to ATTACHMENT 2.6-A</u> . — Methods more restrictive and/or more liberal than SSI. More restrictive methods are described in <u>Supplement 4 to ATTACHMENT 2.6-A</u> and more liberal methods are described in <u>Supplement 8a to ATTACHMENT 2.6-A</u> .
	In determining relative financial responsibility, the agency considers only the income of spouses living in the same household as available to spouses.

91-78
TN NO. 87-35A
Supersedes
TN No.

Approval Date MAR 11 1992

Effective Date OCT 1 1991

HCFA ID: 7985E